

Supplemental Application Data Sheet

Application Information

Application number:: 09/830,228
Filing Date:: 04/24/01
Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: None
Sequence submission?:: Paper
Computer Readable Form (CRF)?:: No
Title:: *Borrelia burgdorferi* Polynucleotides and Sequences
Attorney Docket Number:: PB370US
Request for Early Publication?:: No
Request for Non-Publication?:: No
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Claire M.
Family Name:: Fraser
City of Residence:: Potomac
State or Province of Residence:: MD
Street of mailing address:: 11915 Glen Mill Road
City of mailing address:: Potomac
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 20854

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Owen R.
Family Name:: White
City of Residence:: Rockville
State or Province of Residence:: MD
Street of mailing address:: 17816 Milk Creek Drive
City of mailing address:: Rockville
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 20855

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Rebecca
Family Name:: Clayton
City of Residence:: Hillsboro
State or Province of Residence:: WV
Street of mailing address:: HD-64, Box 180-A
City of mailing address:: Hillsboro
State or Province of mailing address:: WV
Postal or Zip Code of mailing address:: 24946

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Brian A.
Family Name:: Dougherty
City of Residence:: Killingworth
State or Province of Residence:: CT
Street of mailing address:: 10 Rosemary Lane

City of mailing address:: Killingworth
State or Province of mailing address:: CT
Postal or Zip Code of mailing address:: 06419

Applicant Authority Type:: Inventor
Status:: Full Capacity
Given Name:: Raju
Family Name:: Lathigra
City of Residence:: Germantown
State or Province of Residence:: MD
Street of mailing address:: 19051 Steeple PI
City of mailing address:: Germantown
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 20874-6165

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Hamilton O.
Family Name:: Smith
City of Residence:: Reisterstown
State or Province of Residence:: MD
Street of mailing address:: 13607 Hanover Pike
City of mailing address:: Reisterstown
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 21136

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Sherwood
Family Name:: Casjens

City of Residence:: Salt Lake City
State or Province of Residence:: UT
Street of mailing address:: 1360 2nd Ave.
City of mailing address:: Salt Lake City
State or Province of mailing address:: UT
Postal or Zip Code of mailing address:: 84103

Correspondence Information

Correspondence Customer Number:: 22195

Representative Information

Representative Customer Number:: 22195

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US98/12764	06/18/98

Assignee Information

Assignee name:: Human Genome Sciences, Inc.
Street of mailing address:: 9410 Key West Avenue
City of mailing address:: Rockville
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20850

Assignee name:: University of Utah Research Foundation
Street of mailing address:: 201 S. Presidents Circle
City of mailing address:: Salt Lake City
State or Province of mailing address:: UT
Country of mailing address:: US
Postal or Zip Code of mailing address:: 84112

Assignee name:: MedImmune, Inc.
Street of mailing address:: 35 West Watkins Mill Road
City of mailing address:: Gaithersburg
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20878